A RESOLUTION

16-832

IN THE COUNCIL OF THE DISTRICT OF COLUMBIA

October 7, 2006

To confirm the reappointment of Ms. E'lois G. Waller to the Board of Funeral Directors.

RESOLVED, BY THE COUNCIL OF THE DISTRICT OF COLUMBIA, That this resolution may be cited as the "Board of Funeral Directors E'lois G. Waller Confirmation Resolution of 2006".

Sec. 2. The Council of the District of Columbia confirms the reappointment of:

Ms. E'lois G. Waller 1220 Aspen Street, N.W. Washington, D.C. 20012 (Ward 4)

as a licensed funeral director member of the Board of Funeral Directors, established by section 1002(b) of the Second Omnibus Regulatory Reform Amendment Act of 1998, effective April 20, 1999 (D.C. Law 12-261; D.C. Official Code § 47-2853.06), for a term to end March 1, 2009.

- Sec. 3. The Secretary to the Council of the District of Columbia shall transmit a copy of this resolution, upon its adoption, each to the nominee and to the Office of the Mayor.
 - Sec. 4. This resolution shall take effect immediately.

A RESOLUTION

16-873

IN THE COUNCIL OF THE DISTRICT OF COLUMBIA

November 14, 2006

To declare the existence of an emergency with respect to the need to amend the Department of Mental Health Establishment Amendment Act of 2001 to authorize the Department of Mental Health to enter into a long-term ground lease with Greater Southeast Community Hospital to construct a building, at the District's cost, not to exceed \$3.7 million, to house the Comprehensive Psychiatric Emergency Program on a site located on the campus of Greater Southeast Community Hospital; and the Health Services Planning Program Reestablishment Act of 1996 to exempt the Department of Mental Health's Comprehensive Psychiatric Emergency Program and community-based mental health service providers certified by the Department of Mental Health from the certificate of need requirements of section 8 of the Health Services Planning Program Re-establishment Act of 1996.

RESOLVED, BY THE COUNCIL OF THE DISTRICT OF COLUMBIA, That this resolution may be cited as the "Comprehensive Psychiatric Emergency Program Long-Term Ground Lease Emergency Declaration Resolution of 2006".

Sec. 2. (a) There exists an immediate need to amend the Department of Mental Health Establishment Amendment Act of 2001, effective December 18, 2001 (D.C. Law 14-56; D.C. Official Code § 7-1131.01 et seq.), to authorize the Department of Mental Health ("DMH") to enter into a long-term ground lease with Greater Southeast Community Hospital to construct a building, at the District's cost, not to exceed \$3.7 million, to house the Comprehensive Psychiatric Emergency Program ("CPEP") on a site located on the campus of Greater Southeast Community Hospital and to amend the Health Services Planning Program Re-establishment Act of 1996, effective April 9, 1997 (D.C. Law 11-191; D.C. Official Code § 44-401 et seq.) ("Act") to exempt DMH's CPEP and community-based mental health service providers certified by DMH from the certificate of need requirements of section 8 of the Act.

(b) The DMH has operated CPEP at a site located on the campus of D.C. General Hospital for many years. The DMH began searching for an alternate location for CPEP in 1998. The court monitor appointed pursuant to Dixon v. Kelly, C.A. No. 74-285, has repeatedly raised concerns about the condition of the building and its location, as well as about the impact of the condition of the building on the quality of services provided to District residents with mental

illness in reports filed with the U.S. District Court since January 2004.

(c) The DMH staff have worked with the Office of Property Management and local hospitals in the search for an appropriate alternate location for CPEP. Greater Southeast Community Hospital submitted a proposal to DMH to construct a free-standing, modular building on its campus to house CPEP. The building will be adjacent to the emergency department at Greater Southeast Community Hospital and the newly renovated inpatient psychiatric unit. The lease shall include the following terms and conditions:

(1) Have a term of not less than 45 years:

- (2) Provide for an annual rent of \$1.00;
- (3) Provide that the District shall pay Greater Southeast Community Hospital for the cost of construction of the building to house CPEP, which cost shall not exceed 3.7 million;
- (4) Provide that the cost of construction shall be paid by the District in stages related to the progress of construction of the building, as determined by the Director of the Department of Mental Health to be in the best interests of the District;
- (5) Provide that the commencement of the lease is subject to the condition that the mortgagees of the Greater Southeast Community Hospital campus grant a non-disturbance agreement to the District in a form and substance satisfactory to the District; and
- (6) Other terms and conditions that the Director of the Department of Mental Health determines are in the best interests of the District.
- Sec. 3. The Council determines that the circumstances enumerated in section 2 constitute emergency circumstances making it necessary that the Comprehensive Psychiatric Emergency Program Long-Term Ground Lease Emergency Act of 2006 be adopted after a single reading.
 - Sec. 4. This resolution shall take effect immediately.

A RESOLUTION

16-874

IN THE COUNCIL OF THE DISTRICT OF COLUMBIA

November 14, 2006

To declare the existence of an emergency with respect to the need to approve a proposed an amendment to the District of Columbia State Plan for Medical Assistance to expand the coverage of dental services to all eligible adult Medicaid recipients.

RESOLVED, BY THE COUNCIL OF THE DISTRICT OF COLUMBIA, That this resolution may be cited as the "Expansion of Adult Dental Services Emergency Declaration Resolution of 2006".

- Sec. 2. (a) Currently, 60,000 adults in the District of Columbia Medicaid program have dental coverage only in cases of emergency. The State Plan Amendment will provide a comprehensive dental benefit to all adults in the Medicaid Program.
- (b) Adult Medicaid recipients do not have a comprehensive dental benefit incorporated in their program. Therefore, recipients go without routine dental care. The lack of care leads to the loss of teeth and other life threatening or dangerous conditions.
- (c) Once a dental condition requires emergency care and emergency treatment is approved, costs to alleviate the condition increase expenditures for the Medicaid program.
- Sec. 3. The Council determines that the circumstances enumerated in section 2 constitute emergency circumstances making it necessary that the Expansion of Adult Dental Services Emergency Approval Resolution of 2006 be adopted on an emergency basis.
 - Sec. 4. This resolution shall take effect immediately.

A RESOLUTION

<u>16-875</u>

IN THE COUNCIL OF THE DISTRICT OF COLUMBIA

November 14, 2006

To approve, on an emergency basis, an amendment to the District of Columbia State Plan for Medical Assistance to expand the coverage of dental services to all eligible adult Medicaid recipients.

RESOLVED, BY THE COUNCIL OF THE DISTRICT OF COLUMBIA, That this resolution may be cited as the "Expansion of Adult Dental Services Emergency Approval Resolution of 2006".

- Sec. 2. Pursuant to section 1(a) of An Act to enable the District of Columbia to receive Federal financial assistance under Title XIX of the Social Security Act for a medical assistance program, and for other purposes, approved December 27, 1967 (81 Stat. 744; D.C. Official Code § 1-307.02(a)), the Council of the District of Columbia approves the proposed amendment to the District of Columbia State Plan for Medical Assistance, which, when implemented, will provide dental services to all eligible Medicaid recipients in the District of Columbia 21 years of age or older.
- Sec. 3. The Council adopts the fiscal impact statement of the Chief Financial Officer as the fiscal impact statement required by section 602(c)(3) of the Home Rule Act, approved December 24, 1973 (87 Stat. 813; D.C. Official Code §1-206.02(c)(3)).
- Sec. 4. The Secretary to the Council shall transmit a copy of this resolution, upon its adoption, to the Director of the Department of Health and to the Mayor.
 - Sec. 5. This resolution shall take effect immediately.

A RESOLUTION

16-876

IN THE COUNCIL OF THE DISTRICT OF COLUMBIA

November 14, 2006

To declare the existence of an emergency with respect to the need to approve a proposed amendment that will increase the maximum amount of countable income that will be disregarded in determining eligibility of Qualified Medicare Beneficiaries and Specified Low-Income Medicare Beneficiaries in the District of Columbia.

RESOLVED, BY THE COUNCIL OF THE DISTRICT OF COLUMBIA, That this resolution may be cited as the "Determination of Eligibility for Qualified Medicare Beneficiaries Emergency Declaration Resolution of 2006".

Sec. 2. (a) Increasing the amount of income that will be disregarded in determining eligibility of Qualified Medicare Beneficiaries and Specified Low-Income Medicare Beneficiaries will allow individuals presently enrolled in Medicare but not enrolled in Medicaid because their current income is between the eligibility level of 150% of the federal poverty level and 300% of the federal poverty level to become eligible for the Medicaid program.

(b) As these beneficiaries will be eligible for both the Medicare and Medicaid programs, they shall be deemed eligible for the Medicare Part D low-income subsidy ("LIS") by the Centers for Medicare and Medicaid ("CMS"), the federal agency that administers both programs. By being deemed LIS, the Medicaid program pays the monthly premiums for the Medicare Part D program. Beneficiaries will also be enrolled in one of the special plans that do not have deductibles, have co-pays of only \$1.00 or \$2.00, and do not have a benefit limit forcing drug cost payments of 100% after a specific amount.

(c) The emergency approval of the amendment will save beneficiaries that are eligible, most of whom are senior citizens, approximately 3 months supply of Medicare Part D premiums, deductibles, and co pays. For beneficiaries on fixed incomes, these costs often force them to make life or death decisions regarding their ability to purchase their medicines.

- (d) Without immediate approval of the emergency resolution, the District will not be able to submit the state plan amendment to the federal government for approval until the middle of the winter holidays. This would delay the expected approval until an unpredictable date after the beginning of the calendar year. By approving the resolution on an emergency basis, the state plan ammendment can be submitted to CMS immediately and receive approval before the end of this calendar year, thus, facilitating the provision of services beginning in January 2007.
- Sec. 3. The Council determines that the circumstances enumerated in section 2 constitute emergency circumstances making it necessary that the Determination of Eligibility for Qualified Medicare Beneficiaries Emergency Approval Resolution of 2006 be adopted on an emergency basis.

Sec. 4. This resolution shall take effect immediately.

A RESOLUTION

16-877

IN THE COUNCIL OF THE DISTRICT OF COLUMBIA

November 14, 2006

To approve, on an emergency basis, an amendment in the District of Columbia State Plan for Medical Assistance that will increase the maximum amount of countable income that will be disregarded in determining eligibility of Qualified Medicare Beneficiaries and Specified Low-Income Medicare Beneficiaries in the District of Columbia.

RESOLVED, BY THE COUNCIL OF THE DISTRICT OF COLUMBIA, That this resolution may be cited as the "Determination of Eligibility for Qualified Medicare Beneficiaries Emergency Approval Resolution of 2006".

- Sec. 2. Pursuant to section 1(a) of An Act to enable the District of Columbia to receive Federal financial assistance under Title XIX of the Social Security Act for a medical assistance program, and for other purposes, approved December 27, 1967 (81 Stat. 744; D.C. Official Code § 1-307.02(a)), the Council of the District of Columbia approves the proposed amendment to the District of Columbia State Plan for Medical Assistance, which, when implemented, will increase the maximum amount of countable income that will be disregarded in determining eligibility of Qualified Medicare Beneficiaries and Specified Low-Income Medicare Beneficiaries in the District of Columbia.
- Sec. 3. The Council adopts the fiscal impact statement of the Chief Financial Officer as the fiscal impact statement required by section 602(c)(3) of the Home Rule Act, approved December 24, 1973 (87 Stat. 813; D.C. Official Code § 1-206.02(c)(3)).
- Sec. 4. The Secretary to the Council shall transmit a copy of this resolution, upon its adoption, to the Director of the Department of Health and to the Mayor.
 - Sec. 5. This resolution shall take effect immediately.

A RESOLUTION

16-878

IN THE COUNCIL OF THE DISTRICT OF COLUMBIA

November 14, 2006

To declare the existence of an emergency with respect to the need to approve an amendment in the District of Columbia State Plan for Medical Assistance to increase the allowable amount of income in determining State Child Health Insurance Program eligibility.

RESOLVED, BY THE COUNCIL OF THE DISTRICT OF COLUMBIA, That this resolution may be cited as the "Expansion of Allowable Income for Determination of State Child Health Insurance Program Eligibility Emergency Declaration Resolution of 2006".

- Sec. 2. (a) Currently, there are approximately 1,800 children in the District of Columbia whose families have an income between 200% of the Federal Poverty Level ("FPL") and 300% of FPL who do not have health care insurance. Consequently, the healthcare needs of these children go unmet.
- (b) The Fiscal Year 2007 Budget Support Congressional Review Emergency Act of 2006, effective October 23, 2006 (D.C. Act 16-499; 53 DCR 8845), and the Fiscal Year 2007 Budget Support Act of 2006, signed by the Mayor on August 8, 2006 (D.C. Act 16-476; 53 DCR 6899), require the Medical Assistance Administration to expand eligibility in the Medicaid program by increasing the eligibility level in the State Children's Insurance Program from 200% FPL to 300% FPL. A modification of the District of Columbia State Plan for Medical Assistance ("Medicaid State Plan") is needed to accomplish this change in eligibility.
- (c) Pursuant to section 1(a) of An Act to enable the District of Columbia to receive Federal financial assistance under Title XIX of the Social Security Act for a medical assistance program, and for other purposes, approved December 27, 1967 (81 Stat. 744; D.C. Official Code § 1-307.02(a)), the Council must approve a proposed modification of the Medicaid State Plan before the Mayor may submit the modification to the U.S. Department of Health and Human Services.
- (d) Approval of the Expansion of Allowable Income for Determination of State Child Health Insurance Program Eligibility Emergency Approval Resolution of 2006 is necessary to permit the Mayor to expeditiously submit the proposed modification to address the healthcare needs of low-income children.
- Sec. 3. The Council finds that the circumstances enumerated in section 2 constitute emergency circumstances making it necessary that the Expansion of Allowable Income for Determination of State Child Health Insurance Program Eligibility Emergency Approval Resolution of 2006 be adopted after a single reading.
 - Sec. 4. This resolution shall take effect immediately.

A RESOLUTION

16-879

IN THE COUNCIL OF THE DISTRICT OF COLUMBIA

November 14, 2006

To approve, on an emergency basis, an amendment to the District of Columbia State Plan for Medical Assistance to increase the allowable amount of income in determining State Child Health Insurance Program eligibility.

RESOLVED, BY THE COUNCIL OF THE DISTRICT OF COLUMBIA, That this resolution may be cited as the "Expansion of Allowable Income for Determination of State Child Health Insurance Program Eligibility Emergency Approval Resolution of 2006".

- Sec. 2. Pursuant to section 1(a) of An Act to enable the District of Columbia to receive Federal financial assistance under Title XIX of the Social Security Act for a medical assistance program, and for other purposes, approved December 27, 1967 (81 Stat. 744; D.C. Official Code § 1-307.02(a)), the Council of the District of Columbia approves the proposed amendment to the District of Columbia State Plan for Medical Assistance, which, when implemented, will increase the allowable amount of income in determining eligibility for the State Child Health Insurance Program.
- Sec. 3. The Council adopts the fiscal impact statement of the Chief Financial Officer as the fiscal impact statement required by section 602(c)(3) of the Home Rule Act, approved December 24, 1973 (87 Stat. 813; D.C. Official Code § 1-206.02(c)(3)).
- Sec. 4. The Secretary to the Council of the District of Columbia shall transmit a copy of this resolution, upon its adoption, to the Director of the Department of Health and to the Mayor.
 - Sec. 5. This resolution shall take effect immediately.